

Please type a plus sign (+) inside this box → [ + ]

PTO/SB/30 (04-05)

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

+

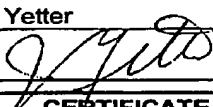
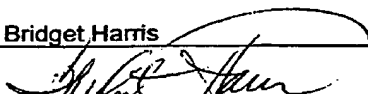
<b>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</b> Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/607,645
	Filing Date	6/27/2003
	First Named Inventor	Holt et al.
	Art Unit	1746
	Examiner Name	A. Markhoff
	Attorney Docket Number	6269RDS
	Confirmation Number	2686

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.  
 Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

- Submission required under 37 C.F.R. § 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
  - ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
    - ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
    - ☐ Other \_\_\_\_\_
  - Enclosed
    - ☒ Amendment/Reply
    - ☐ Affidavit(s)/Declaration(s)
    - ☐ Information Disclosure Statement (IDS)
    - ☐ Other \_\_\_\_\_
- Miscellaneous**
  - ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of \_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
  - ☐ Other \_\_\_\_\_
- Fees** The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.
 

☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. **16-2480**.

  - ☒ RCE fee required under 37 C.F.R. § 1.17(e)
  - ☐ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
  - ☐ Suspension of action fee under 37 C.F.R. 1.17(i)
  - ☐ Other \_\_\_\_\_

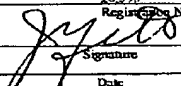
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME (Print/Type)	Jerry J. Yetter	Reg. No. (Attorney/Agent) 26,598
SIGNATURE		DATE July 26, 2005
CERTIFICATE OF MAILING OR TRANSMISSION		
I hereby certify that that I have reasonable basis to expect that, on the date shown below, this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office via fax number 703-872-9306 on the date shown below:		
NAME (Print/Type)	Bridget Harris	
SIGNATURE		DATE July 26, 2005

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send Fees and Completed forms to the following address: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

(Revised for P&amp;G use 5/27/2005)

07/27/2005 SFELEKE1 00000071 162480 10607645

01 FC:1801 790.00 DA

Certification of Mailing or Facsimile Transmission	
I hereby certify that I have reasonable basis to expect that, on the date shown below, this correspondence is being submitted as indicated below:	
[X] Facsimile transmitted to the U.S. Patent and Trademark Office via fax number (703) 872-9306	
Jerry J. Yetter	26,598
Name	Registration No. (if applicable)
	Signature
July 26, 2005	Date

**IN THE UNITED STATES PATENT & TRADEMARK OFFICE  
RESPONSE/AMENDMENT**

COMMISSIONER FOR PATENTS  
VIA FACSIMILE 703/872-9306

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Application No.	:	10/607,645
Applicant(s)	:	Steven Allen Holt et al.
Filed	:	6/27/2003
Title	:	Cleaning Implement Having High Absorbent Capacity
TC/A.U.	:	1700/1746
Examiner	:	A. Markoff
Conf. No.	:	2686
Docket No.	:	6269RDC
Customer No.	:	27752

1. ☒ No additional fees (claims fees or extension fees) are known to be required.
2. ☐ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	* 22	MINUS	** 22	= 0	x \$ 50 =	\$
INDEP.	* 2	MINUS	*** 3	= 0	x \$ 200 =	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$ 360 =	\$
					TOTAL	\$

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. ☒ The Commissioner is hereby petitioned under 37 CFR §1.136(a) to grant any extension of time needed for timely response to the Office Action dated 5/23/2005 in the above-identified application to preserve pendency of said application. The processing fee under 37 CFR §1.17 has been determined as follows: \$0 for a 0-month extension of time.
4. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
  - a. ☒ Any patent application processing fees under 37 CFR §1.16.
  - b. ☒ Any patent application processing fees under 37 CFR §1.17.
5. The Director is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

THE PROCTER & GAMBLE COMPANY

By

  
Jerry J. Yetter

Date: July 26, 2005

Customer No. 27752

(Transamd.doc) Revised 12/08/2004

Registration No. 26,598

(513) 627-2996

**RECEIVED  
CENTRAL FAX CENTER**

Jul-26 05 10:11a

SEWP 5 User

627-1050

P. 6

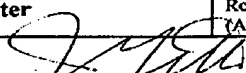
**JUL 26 2005**

PTO/SB/17 (12-04)  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

+

<b>FEE TRANSMITTAL for FY 2005</b> Patent fees are subject to annual revision. Effective December 8, 2004	<b>Complete if Known</b>	
	Application Number	10/607,645
	Confirmation Number	2686
	Filing Date	6/27/2003
	First Named Inventor	Steven Allen Holt
	Examiner Name	A. Markoff
	Art Unit	1746
<b>TOTAL AMOUNT OF PAYMENT (\$790.00)</b>		Attorney Docket No. 6269RDC

<b>METHOD OF PAYMENT</b>		<b>FEE CALCULATION (continued)</b>																																														
1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company		<b>5. ADDITIONAL FEES</b> <table border="1"> <thead> <tr> <th>Fee Description</th> <th></th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1<sup>st</sup> month</td> <td>(\$120)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2<sup>nd</sup> month</td> <td>(\$450)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3<sup>rd</sup> month</td> <td>(\$1,020)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4<sup>th</sup> month</td> <td>(\$1,590)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5<sup>th</sup> month</td> <td>(\$2,160)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)</td> <td>(\$130)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17 (q) Missing Parts (provisional)</td> <td>(\$50)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td>(\$130)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other: Request for Continued Examination (RCE) under 37 CFR 1.114</td> <td>(\$790)</td> <td><input checked="" type="checkbox"/></td> </tr> </tbody> </table>		Fee Description		Fee Paid	Extension for reply within 1 <sup>st</sup> month	(\$120)	<input type="checkbox"/>	Extension for reply within 2 <sup>nd</sup> month	(\$450)	<input type="checkbox"/>	Extension for reply within 3 <sup>rd</sup> month	(\$1,020)	<input type="checkbox"/>	Extension for reply within 4 <sup>th</sup> month	(\$1,590)	<input type="checkbox"/>	Extension for reply within 5 <sup>th</sup> month	(\$2,160)	<input type="checkbox"/>	Information Disclosure Statement fee	(\$180)	<input type="checkbox"/>	37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)	(\$130)	<input type="checkbox"/>	37 CFR 1.17 (q) Missing Parts (provisional)	(\$50)	<input type="checkbox"/>	Non-English specification	(\$130)	<input type="checkbox"/>	Notice of Appeal	(\$500)	<input type="checkbox"/>	Filing a brief in support of an appeal	(\$500)	<input type="checkbox"/>	Request for oral hearing	(\$1,000)	<input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370)	<input type="checkbox"/>	Other: Request for Continued Examination (RCE) under 37 CFR 1.114	(\$790)	<input checked="" type="checkbox"/>
Fee Description		Fee Paid																																														
Extension for reply within 1 <sup>st</sup> month	(\$120)	<input type="checkbox"/>																																														
Extension for reply within 2 <sup>nd</sup> month	(\$450)	<input type="checkbox"/>																																														
Extension for reply within 3 <sup>rd</sup> month	(\$1,020)	<input type="checkbox"/>																																														
Extension for reply within 4 <sup>th</sup> month	(\$1,590)	<input type="checkbox"/>																																														
Extension for reply within 5 <sup>th</sup> month	(\$2,160)	<input type="checkbox"/>																																														
Information Disclosure Statement fee	(\$180)	<input type="checkbox"/>																																														
37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)	(\$130)	<input type="checkbox"/>																																														
37 CFR 1.17 (q) Missing Parts (provisional)	(\$50)	<input type="checkbox"/>																																														
Non-English specification	(\$130)	<input type="checkbox"/>																																														
Notice of Appeal	(\$500)	<input type="checkbox"/>																																														
Filing a brief in support of an appeal	(\$500)	<input type="checkbox"/>																																														
Request for oral hearing	(\$1,000)	<input type="checkbox"/>																																														
Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370)	<input type="checkbox"/>																																														
Other: Request for Continued Examination (RCE) under 37 CFR 1.114	(\$790)	<input checked="" type="checkbox"/>																																														
<b>FEE CALCULATION</b> 2. <b>BASIC FILING FEE - Large Entity</b> <table border="1"> <thead> <tr> <th></th> <th>FILING FEE</th> <th>SEARCH FEE</th> <th>EXAMINATION FEE</th> <th></th> </tr> </thead> <tbody> <tr> <td><u>Application Type</u></td> <td></td> <td></td> <td></td> <td><u>Fee Paid</u></td> </tr> <tr> <td>Utility</td> <td>(\$300)</td> <td>(\$500)</td> <td>(\$200)</td> <td>(Total = \$1000) <input type="checkbox"/></td> </tr> <tr> <td>Design</td> <td>(\$200)</td> <td>(\$100)</td> <td>(\$130)</td> <td>(Total = \$430) <input type="checkbox"/></td> </tr> <tr> <td>Reissue</td> <td>(\$300)</td> <td>(\$500)</td> <td>(\$600)</td> <td>(Total = \$1400) <input type="checkbox"/></td> </tr> <tr> <td>Provisional filing fee</td> <td></td> <td></td> <td></td> <td>(Total = \$200) <input type="checkbox"/></td> </tr> </tbody> </table>			FILING FEE	SEARCH FEE	EXAMINATION FEE		<u>Application Type</u>				<u>Fee Paid</u>	Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>	Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>	Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>	Provisional filing fee				(Total = \$200) <input type="checkbox"/>																	
	FILING FEE	SEARCH FEE	EXAMINATION FEE																																													
<u>Application Type</u>				<u>Fee Paid</u>																																												
Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>																																												
Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>																																												
Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>																																												
Provisional filing fee				(Total = \$200) <input type="checkbox"/>																																												
3. <b>APPLICATION SIZE FEE:</b> Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) SUBTOTAL (2)+(3) (\$) <input type="checkbox"/>																																																
4. <b>EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</b> <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="checkbox"/> - 20** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Independent Claims</td> <td><input type="checkbox"/> - 3** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td></td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below <b>Fee Description</b> Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$) <input type="checkbox"/>			Extra Claims	Fee from Below	Fee Paid	Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Multiple Dependent claims:		<input type="checkbox"/> =	<input type="checkbox"/>																															
	Extra Claims	Fee from Below	Fee Paid																																													
Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>																																													
Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>																																													
Multiple Dependent claims:		<input type="checkbox"/> =	<input type="checkbox"/>																																													
SUBTOTAL (4) (\$)		SUBTOTAL (5) (\$) [790]																																														

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Jerry J. Yetter	Registration No. (Attorney/Agent)	26,598
Signature		Telephone	(513) 627-2996
		Date	July 26, 2005

+ This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

RECEIVED  
CENTRAL FAX CENTER

JUL 26 2005

Certification of Mailing or Facsimile Transmission	
I hereby certify that I have reasonable basis to expect that, on the date shown below, this correspondence is being submitted as indicated below:	
<input checked="" type="checkbox"/> [X] Facsimile transmitted to the U.S. Patent and Trademark Office via fax number 571/273-8300	
Forry J. Yotter Name	26, 598 Registration No. (if applicable)
July 26, 2005	Signature Date

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No. : 10/607,645  
Applicant(s) : Steven Allen Holt et al.  
Filed : 6/27/2003  
Title : Cleaning Implement Having High Absorbent Capacity  
TC/A.U. : 1700/1746  
Examiner : A. Markoff  
Conf. No. : 2686  
Docket No. : 6269RDC  
Customer No. : 27752

**SUBMISSION OF AMENDMENT WITH FILING OF RCE**

Commissioner for Patents

VIA FACSIMILE 571/273-8300

Dear Sir:

This is in response to the Office Action of 5/23/2005, made Final, submitted herewith are the RCE filing papers and an amendment in support of patentability. The fee is to be charged to Deposit Account No. 16-2480, as authorized by the enclosed transmittal form.

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin at page 5 of this paper.